DECLARATION FOR PATENT APPLICATION

Docket No.71128

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: <u>DEVICE FOR DISPENSING MEDICAL ACTIVE INGREDIENTS</u>

the specification of which

(Check one)	[X] is attached hereto.	
	[] was filed on	as
	Application Serial No	u.
	and was amended on	

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) 103 08 401.0-44 (Number)	Germany (Country)	27/Feb./2003 (Day/Month/Year filed)	Priority Claimed Yes
(Number)	(Country)	(Day/Month/Year filed)	
(Number)	(Country)	(Day/Month/Year filed)	

I hereby claim the benefit under Title 35, United States Code, 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No)

(Filing Date)

(Patented, Pending, Abandoned)

(Application Serial No)

(Filing Date)

(Patented, Pending, Abandoned)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: John James McGlew, Reg. 31,903; and/or Hilda S. McGlew Reg. 30,295; and/or Theobald J. Dengler, Reg. 34,575; and/or Eric S. Dubac, Reg. 54,078.

CUSTOMER NO. 000023872

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McGLEW AND TUTTLE, P.C. SCARBOROUGH STATION SCARBOROUGH, NEW YORK 10510-0827

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor <u>Ernst-Wilhelm SCHUBERT</u>

Inventor's signature

Residence <u>Heinrich-Mann-Ring 6, D-23566 Lübeck, Germany</u> Citizenship <u>GERMANY</u>

Post Office Address <u>Heinrich-Mann-Ring 6, D-23566 Lübeck, Germany</u>

Full name of second inventor Götz KULLIK →Inventor's signature

→Date 19.11.03 Residence Bugenhagenstr. 1A, D-23568 Lübeck, Germany Citizenship GERMANY Post Office Address Bugenhagenstr. 1A, D-23568 Lübeck, Germany BLUMENTHAL BL 27. 11.03 Full name of third inventor Tilman von BLUMETHAL →Inventor's signature Residence Pelzerst. 1, D-23564 Lübeck, Germany Citizenship GERMANY Post Office Address Pelzerst. 1, D-23564 Lübeck, Germany Full name of fourth inventor Residence _____ Citizenship____ Post Office Address

Full name of fifth inventor _____

→Inventor's signature_____ **→**Date Residence _____ Citizenship Post Office Address

Full name of sixth inventor _____

→Inventor's signature_____ → Date Residence _____ Citizenship ____ Post Office Address _____

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